

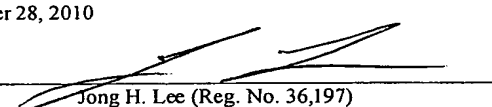
U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE

REQUEST FOR CONTINUED EXAMINATION (RCE)

TRANSMITTAL FORM (37 C.F.R. § 1.114)

DOCKET NO. 10191/2020	APPLICATION SERIAL NO. 09/960,563	EXAMINER Tuan C. TO	ART UNIT 3663
INVENTOR(S): Bernd PETZOLD et al.		CONFIRMATION NO. 5713	

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop: RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on
Date: October 28, 2010
Signature: 
Jong H. Lee (Reg. No. 36,197)

This is a **request for continued examination** under 37 C.F.R. § 1.114 (RCE) of pending application Serial No. **09/960,563** filed on **September 12, 2001** entitled **NAVIGATIONAL SYSTEM**. The following constitutes the submission **required** by 37 C.F.R. § 1.114(a) and is attached:

- ☒ Please enter the enclosed "**AMENDMENT ACCOMPANYING RCE**," which is being filed in lieu of a Reply Brief (in response to the Examiner's Answer mailed on August 30, 2010).
☐ Information Disclosure Statement
☐ Drawing Changes
☐ Other Submission:


1. The filing fee for this RCE and the required amendment/submission is calculated below. The fee below is calculated based on the status of the claims after the entry of the attached. Amendment/submission. The fee for any new additional claims is included with this RCE, the fee for previously entered additional claims having already been paid.

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA	RATE (\$) PER CLAIM	FEE (\$)
BASIC FEE						810.00
TOTAL CLAIMS	11	MINUS	20	0	52.00	0.00
INDEPENDENT CLAIMS	1	MINUS	3	0	220.00	0.00
MULTIPLE DEPENDENT CLAIM					390.00	
				Number extra must be zero or larger	TOTAL	810.00
If Applicant is a small entity under 37 C.F.R. §§ 1.9 and 1.27, then divide total fee by 2, and enter amount here.				SMALL ENTITY TOTAL		00

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2. Please charge the required RCE and submission filing fee of **\$810.00** to the deposit account of **Kenyon & Kenyon LLP's** Deposit Account Number **11-0600**.
3. The Commissioner is hereby authorized to charge to **Kenyon & Kenyon LLP** Deposit Account Number **11-0600**, payment of any additional fees required in connection with this communication or arising during the pendency of this application, or to credit any overpayment, to the deposit account of **Kenyon & Kenyon LLP**, Deposit Account Number **11-0600**.

Respectfully submitted,

 (R. NO. 36,197)

Dated: October 28, 2010

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